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GTA

Brampton Civic Hospital's acute care unit for dementia patients boasts a world first

The unit is the first to be accredited in the Butterfly approach, which involves emotion-centred care for seniors. Staff say they're seeing early positive results.

By **Patty Winsa** Data Reporter

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When you walk the halls of Brampton Civic Hospital and reach the unit for dementia patients who need acute care, the change in scenery is dramatic.

Formerly beige walls are now brightly coloured in hues of purple, pink and green. Interactive artworks decorate the corridors. And the doors to the patients' room have been covered in decals so that each looks different — one covered in flowers, another with the image of a bright blue wood-panelled door — visual clues to help patients navigate the unit.

The transformation is due to the hospital's adoption of the [Butterfly approach](#). It's a method of care for dementia patients that incorporates emotional support from staff, and comes from a knowledge of a patient's background, in a surrounding that meets their physical needs.

Brampton Civic, which is part of the William Osler Health System, adopted the method in its acute care unit in 2021, but in February it was accredited by Meaningful Care Matters, the U.K. organization that developed the Butterfly approach — a first for any hospital in the world.



The emotion-centred care has had a number of benefits for patients and staff, said Patricia Geerlinks, a registered nurse who is director of women's, children's and seniors' programs for William Osler.

"We've seen an increase in patient and family satisfaction, staff and physician engagement and an increase in staff retention," she said. "That's huge in the face of our health-care crisis throughout this pandemic."

Geerlinks said anecdotal evidence also points to a reduction in the number of patient falls, in their functional decline, and in expressive behaviours, such as pacing or restlessness, typically related to an unmet need linked to dementia.

The method was first adopted in Ontario by Peel region, which implemented it in Malton Village, a long-term-care home, in 2018, followed by Sheridan Villa Long Term Care Centre. The region is in the process of changing over its three remaining long-term care homes.

But it's never been used in a transitory hospital setting.

Patients who are admitted to the unit, known formerly as the Acute Care of the Elderly unit, or ACE, are assessed for their medical needs as well as for their background in a module called "About Me."

"We take into account the person they were before they developed dementia," said Geerlinks. "And we implement that in our admission assessment and throughout their care in acute care.

"We've never done that before in acute care."



The unit's staff are trained in emotion-based care and person-centred care for dementia populations, said Geerlinks.

The hallmark of dementia is memory change that begins with short-term memory loss, said Dr. Sudip Saha, William Osler's medical director of seniors' health and division head of geriatric medicine.

As the disease progresses, it affects the ability to recall words or their meaning, as well as motor and cognitive skills. It can also affect the ability to judge the spatial relationship between objects or to see colour differences, all deficits that can lead to behavioural issues.

The design of the unit – the bright walls, the doors – is to help patients navigate. And knowing a patient's background helps staff understand behaviour that may seem out of the ordinary, said Saha, such as a patient who is trying to dress for a job they once had. Understanding that can help reduce pharmacological intervention.

"The Butterfly model evaluates the dementia patient based on their emotional construct," said Saha. "And it looks to create a homelike environment where people know the individual for what the person's emotional landscape is."



With an aging population, and an associated increase in patients with dementia, Osler would like to implement the Butterfly approach in other in-patient and outpatient units.

There is a cost to bringing in the program due to staff training and redesigning the hospital unit. The organization Meaningful Care Matters served as a consultant. Those costs, which Osler didn't divulge, were covered by the hospital system.

Currently, there's no Ontario data that says the approach works.

The [pandemic](#), and its restrictions on [long-term-care homes](#), made it impossible to gather data on the Butterfly approach being used in Peel long-term care homes, where Saha championed it.



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But Marianne Klein, administrator of Sheridan Villa Long Term Care Centre, said it “is evident to us that people living in long-term care need an emotion-based approach to care that can support everyone, and in our Butterfly home areas, people are free to be who they are, and our role is to support and sustain this.

“The focus of the team is on ‘being with’ people rather than ‘doing for’ people,” she said. “Emotional connection is elevated above the completion of tasks and activities are organically integrated into the day ... Butterfly households dine together as a family and team members are encouraged to get to know the story of each person.”

Saha said that as the region moves forward with the novel approach, the intent is to gather data.

“Part of our responsibility for the Region of Peel, as well as at Wiliam Osler, is to clinically validate the model. In 2023, we are in a state of evidence-based medicine and for us to continue to promote this I think it needs to be backed up by hard evidence in terms of clinical data.”



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